## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

99150-Ci

| (Column 1) (Column 2)  |   |   |               |                                    |                           |                                  |       | SMALL ENTITY TYPE  |                        |        | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|--|---|---|---------------|------------------------------------|---------------------------|----------------------------------|-------|--------------------|------------------------|--------|-------------------------------|------------------------|--|
| TOTAL CLAIMS   |   |   | i             |                                    | (00.0                     |                                  |       |                    |                        | 7<br>7 |                               |                        |  |
| rop .  |   |   |               |                                    |                           |                                  |       | RATE               | FEE                    | -      | RATE                          | FEE                    |  |
| FOR  |   |   | NUMBER FILED  |                                    | NUMB                      | ER EXTRA                         | ·     | BASIC FEE          | 385.00                 | OR     | BASIC FEE                     | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |   |   | 7 minus 20=   |                                    | *                         |                                  |       | X\$ 9=             |                        | OR     | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS   |   |   | A minus 3 = * |                                    | *                         |                                  |       | X43=               |                        | OR     | X86=                          |                        |  |
| MU   | JLTIPLE DEPEI   | NDENT CLAIM P                             | RESENT        |                                    |                           |                                  |       | +145=              |                        | OR     | +290=                         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |               |                                    |                           | olumn 2                          |       | TOTAL              | · -                    | OR     | TOTAL                         | 770                    |  |
| CLAIMS AS AMENDED - PART II  |   |   |               |                                    |                           |                                  |       |                    | <u> </u>               |        | OTHER                         | THAN                   |  |
| (Column 1) (Column 2) (Column 2)   |   |   |               |                                    |                           |                                  |       | SMALL              | ENTITY                 | OR     | SMALL                         |                        |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER<br>JUSLY              | PRESENT<br>EXTRA                 |       | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus         | **                                 |                           | =                                |       | ·X\$ 9=            |                        | OR     | X\$18=                        | 0                      |  |
| AME  | Independent   | *   | Minus         | ***                                | <u> </u>                  | =                                |       | X43=               |                        | OR     | X86=                          |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |   |               |                                    |                           |                                  |       | +145=              |                        | OR     | +290=                         |                        |  |
|  |   |   |               |                                    |                           |                                  |       | TOTAL              |                        |        | TOTAL                         |                        |  |
|  |   | A   | DDIT. FEE     |                                    | ] ,                       | ADDIT. FEE                       |       |                    |                        |        |                               |                        |  |
| AMENDMENT B  |   | (Column 1) CLAIMS REMAINING               |               | (Colum                             | ST                        | (Column 3)                       | Г     | T                  | ADDI-                  | 1      |                               | ADDI-                  |  |
|  |   | AFTER<br>AMENDMENT                        |               | NUMB<br>PREVIO<br>PAID F           | USLY                      | PRESENT<br>EXTRA                 |       | RATE               | TIONAL<br>FEE          |        | RATE                          | TIONAL                 |  |
|  | Total   | *   | Minus         | **                                 | •                         | =                                |       | X\$ 9=             |                        | OR     | X\$18=                        |                        |  |
|  | Independent   | *   | Minus         | ***                                |                           | = .                              |       | X43=               |                        |        | X86=                          |                        |  |
| 1  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |               |                                    |                           |                                  |       |                    |                        | OR     |                               |                        |  |
|  |   |   |               |                                    |                           |                                  |       | +145=              |                        | OR     | +290=                         |                        |  |
|  |   |   |               |                                    |                           |                                  |       | TOTAL<br>DDIT. FEE |                        | OR ,   | TOTAL<br>ADDIT, FEE           |                        |  |
|  | · .   | (Column 1) (Column 2) (Colum              |               |                                    |                           |                                  |       | • .                | . •                    |        |                               |                        |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER<br>USLY                | PRESENT<br>EXTRA                 |       | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus         | **                                 |                           | =                                | ſ     | X\$ 9=             |                        | OR     | X\$18=                        |                        |  |
|  | Independent   |   | Minus         | ***                                |                           | =                                | r     | X43=               |                        |        | X86=                          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |               |                                    |                           |                                  |       |                    |                        | OR     | 7,00=                         |                        |  |
| * H  | the entry in colum  |   | +145=         |                                    | OR                        | +290=                            |       |                    |                        |        |                               |                        |  |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |               |                                    |                           |                                  |       |                    |                        | OR A   | TOTAL<br>DDIT. FEE            |                        |  |
| 1  | The "Highest Num  | ber Previously Paid                       | For (Total or | o SPACE IS<br>Independer           | iess than<br>it) is the l | is, enter "3."<br>highest number | found | d in the appr      | opriat box             |        |                               |                        |  |